# Certificate of Express Mailing

"Express Mail" Mailing Label Number: **EV664346451US**
Date of Deposit: **07/11/2006**
Ref: Case Docket No.: **28944/37579**
First Named Inventor: **Maurice Milgram**
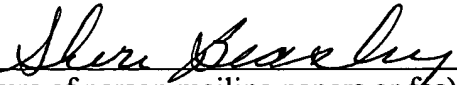Serial Number: **09/900,716**
Filing Date: **07/06/2001**
Title of Case: **A Security Method Using Information Transmission by Optical Means and an Optical Disk for Implementing the Method**

I hereby certify that the attached papers are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and addressed to the Commissioner of Patents and Trademarks, Alexandria, VA 22313-1450

1. Response B.
2. Amendment transmittal.
3. Duplicate Amendment transmittal.
4. Petition For Extension of Time
5. Check for fees in the amount of $510.00.
6. Certificate of express mailing.
7. Postcard listing contents.

Sheri Beasley

(Typed or printed name of person mailing paper or fee)

_Sheri Beasley_

(Signature of person mailing papers or fee)

07-13-06          21 31

Method of Transmission: EV664346451US          CASE DOCKET NO. 28944/37579

In reference to application of   Maurice Milgram

Serial No. 09/900,716

For  A Security Method Using Information Transmission by Optical Means and an Optical Disk for Implementing the Method

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

☑ No additional fee is required.
☑ Applicant claims Small entity status under 37 CFR 1.27.
☐ The fee has been calculated as shown below.

| **** CLAIMS AS AMENDED **** | | | | | | | |
|---|---|---|---|---|---|---|---|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | Claims Remaining After Amendment | | Highest No. Paid For Previously | Present Extra | Rate Small Entity | Rate Large Entity | Additional Fee |
| Total Claims | 17 | Minus | ** 40 | 0 | $ 25 | $ 50 | $ 0.00 |
| Indep Claims | 2 | Minus | *** 3 | 0 | $ 100 | $ 200 | $ 0.00 |
| ☐ First presentation of a multiple dependent claim | | | | | $ 0 | $ 0 | $ 0.00 |
| ☐ Terminal Disclaimer Fees | | | | | | | $ 0.00 |
| Extension Fee | ☐ 1st Month | | ☐ 2nd Month | | ☑ 3rd Month | | $ 510.00 |
| Total additional for claims, time extensions and disclaimer fees | | | | | | | $ 510.00 |

** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.
*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.
**** Multiple dependencies, if any, included in the above calculation.
* If the entry in column 2 is less than the entry in column 4, write "O" in column 5.

☑ A check in the amount of   510.00   is attached.

☐ Charge $   0.00   to deposit account   50-0534  . (A duplicate of this sheet is enclosed)

☑ Please charge any additional fees or credit overpayment to Deposit Account   50-0534  . A duplicate of this sheet is enclosed.

Respectfully Submitted, /Donald R. Boys/

Donald R. Boys
Reg. No. 35074

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